

FOR
TANKS
IN
NC

Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location.
[SEE MAP ON REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL
OFFICE ADDRESS].

State Use Only **RECEIVED**
I.D. Number **N.C. Dept. of EHNF**

Date Received **JAN 26 1994**

INSTRUCTIONS

Complete and return within (30) days following completion of site investigation.

I. Ownership of Tank(s)

NCDEHNR-Division of Forest Resources
Owner Name (Corporation, Individual, Public Agency, or Other Entity)
P. O. Box 27687
Street Address
Wake
County
Raleigh, NC 27611
City State Zip Code
(919) 733-2162
Area Code Telephone Number

II. Location of Tank(s)

DFR - Wilkes County Headquarters
Facility Name or Company
021842-1
Facility ID # (if available)
SR 1143
Street Address or State Road
Wilkes Wilkesboro 28697
County City Zip Code
(919) 973-4104
Area Code Telephone Number

III. Contact Person

Patrick Harris Construction Specialist (919) 553-6178
Name Job Title Telephone No. (Area Code)
Closure Contractor RPM Services, Inc., P. O. Box 6864, Asheville, NC (704) 254-4014
(Name) (Address) Telephone No. (Area Code)
Lab Froehling & Robertson, Inc., 310 Hubert St., Raleigh, NC (919) 828-3441
(Name) (Address) Telephone No. (Area Code)

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

| Tank No. | Size in Gallons | Tank Dimensions | Last Contents | Water in Excavation | | Free Product | | Notable Odor or Visible Soil Contamination | |
|----------|-----------------|-----------------|---------------|---------------------|----|--------------|----|--|----|
| | | | | Yes | No | Yes | No | Yes | No |
| 1 | 1,000 | 4' ϕ x 12' | Gasoline | | x | | x | | x |
| | | | | | | | | | |
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| | | | | | | | | | |
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See reverse side of pink copy (owner's copy) for additional information required by N.C. - DEM in the written report and sketch.

VII. Check List

Check the activities completed.

- ☒ Contact local fire marshal
☒ Notify DEM Regional Office before abandonment.
☒ Drain & flush piping into tank.
☒ Remove all product and residuals from tank.
☒ Excavate down to tank.
☒ Clean and inspect tank.
☒ Remove drop tube, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures.
☒ Cap or plug all lines except the vent and fill lines.
☒ Purge tank of all product & flammable vapors.
☒ Cut one or more large holes in the tanks.
☒ Backfill the area.
Date Tank(s) Permanently closed: 12/02/93
Date of Change-in-Service:

- ABANDONMENT IN PLACE**
☐ Fill tank until material overflows tank opening;
☐ Plug or cap all openings;
☐ Disconnect and cap or remove vent line
☐ Solid inert material used - specify: _____

- REMOVAL**
☒ Create vent hole
☒ Label tank
☒ Dispose of tank in approved manner
Final tank destination: Scrap -
RPM Services, Inc., Asheville

VIII. Certification (Read and Sign)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Print name and official title of owner or owner's authorized representative

Signature

Date Signed

J. D. Solomon, P.E., Project Manager

1/18/94